

Planning and Zoning Department  
PO Box 58  
Washburn, WI 54891  
(715) 373-6138

Date Stamp (Received)  
00 31 2016

Permit #:	16-0447
Date:	12-7-16
Amount Paid:	<del>550</del> 11-1-16
Refund:	

Permit #:	16-0447
Date:	12-7-16
Amount Paid:	<del>1530</del> 11-1-16
Refund:	

Permit #:	16-0447
Date:	12-7-16
Amount Paid:	<del>550</del> 11-1-16
Refund:	

TYPE OF PERMIT REQUESTED →		LAND USE	SANITARY	PRIVATE	CONDITIONAL USE	SPECIAL USE	B.O.A.	OTHER
Owner's Name:		Paul Zickler					Telephone:	
Address of Property:		5310 Leavenworth Ave S City/State/Zip: MN 55419					Cell Phone:	
46009 Cedar Lake Rd		CARGLE WI 54821					412-790-7107	
Contractor:		Contractor Phone:		Plumber:		Plumber Phone:		
Rick Verbits		507-273-0227		Blakeney		715-482-6052		
Authorized Agent: (Person Signing Application on behalf of Owner(s))		Agent Phone:		Agent Mailing Address (include City/State/Zip):		Written Authorization Attached		
Rick W. Verbits		507-273-8121		2053 57th Street NW Richton Park IL 60471		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
PROJECT LOCATION		Legal Description: (Use Tax Statement)		Tax ID# (4-5 digits)		Recorded Deed (i.e. # assigned by Register of Deeds)		
		1/4, 1/4		Gov't Lot		Lot(s)		CSM
		2		1000		Vol & Page		6/284
		Town of:		Moundville		Lot Size		128 x 520
Section 32, Township 44 N, Range 66 W		Subdivision:		Acreage		1.7		
Shoreland →		Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain?		Distance Structure is from Shoreline: feet		Is Property in Floodplain Zone?		Acre Wetlands Present?
Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes—continue →		Distance Structure is from Shoreline: feet		76		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Value at Time of Completion * Include donated time & material	Project	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	Water
\$ 150 000	<input checked="" type="checkbox"/> New Construction <input type="checkbox"/> Addition/Alteration <input type="checkbox"/> Conversion <input type="checkbox"/> Relocate (existing bldg) <input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> 1-Story <input checked="" type="checkbox"/> 1-Story + Loft <input type="checkbox"/> 2-Story <input type="checkbox"/> Basement <input checked="" type="checkbox"/> No Basement <input type="checkbox"/> Foundation	<input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> None	<input type="checkbox"/> Municipal/City <input checked="" type="checkbox"/> (New) Sanitary Specify Type: <u>Capit</u> <input type="checkbox"/> Sanitary (Exists) Specify Type: _____ <input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon) <input type="checkbox"/> Portable (w/service contract) <input type="checkbox"/> Compost Toilet <input type="checkbox"/> None	<input type="checkbox"/> City <input checked="" type="checkbox"/> Well

Existing Structure: (if permit being applied for is relevant to it)	Length:	Width:	Height:
Promoted Construction:	Length: 32	Width: 40	Height: 10

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	(      X      )	
	<input checked="" type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	( 32 X 40 )	1280
		with Loft	(      X      )	
		with a Porch	( 15 X 12 )	240
		with (2 <sup>nd</sup> ) Porch	(      X      )	
		with a Deck	(      X      )	
		with (2 <sup>nd</sup> ) Deck	(      X      )	
<input type="checkbox"/> Commercial Use		with Attached Garage	(      X      )	
	<input type="checkbox"/>	Bunkhouse w/ ( <input type="checkbox"/> sanitary, <u>or</u> <input type="checkbox"/> sleeping quarters, <u>or</u> <input type="checkbox"/> cooking & food prep facilities)	(      X      )	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	(      X      )	
	<input type="checkbox"/>	Addition/Alteration (specify) _____	(      X      )	
	<input type="checkbox"/>	Accessory Building (specify) _____	(      X      )	
<input type="checkbox"/> Accessory Building Addition/Alteration (specify) _____				
Special Use: (explain) _____	<input type="checkbox"/>		(      X      )	
	<input type="checkbox"/>	Conditional Use: (explain) _____	(      X      )	
Other: (explain) _____	<input type="checkbox"/>		(      X      )	
	<input type="checkbox"/>			

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information. I (we) am (are) providing in or with this application, I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

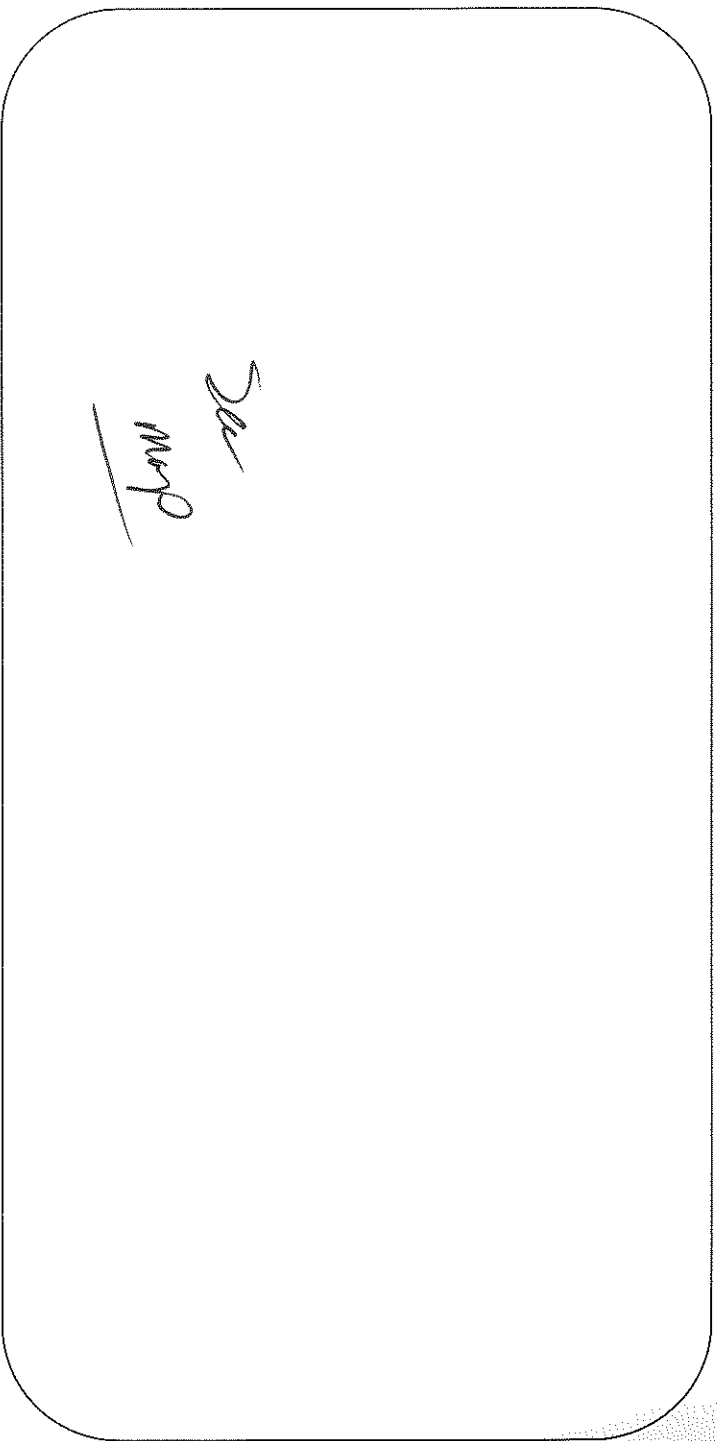
Date \_\_\_\_\_

Address to send permit 2053 STAGBURN DR SW P. J. JESTER, JR. 55707 15-00000-01

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

box below: Draw or Sketch your Property (regardless of what you are applying for)

- (1) Show Location of: **Proposed Construction**
- (2) Show / Indicate: **North (N) on Plot Plan**
- (3) Show Location of (\*): **(\*) Driveway and (\*) Frontage Road (Name Frontage Road)**
- (4) Show: **All Existing Structures on your Property**
- (5) Show: **(\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)**
- (6) Show any (\*): **(\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond**
- (7) Show any (\*): **(\*) Wetlands; or (\*) Slopes over 20%**



Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	380 Feet	Setback from the Lake (ordinary high-water mark)	75 Feet
Setback from the Established Right-of-Way	Feet	Setback from the River, Stream, Creek	Feet
Setback from the North Lot Line	160 Feet	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	130 Feet	Setback from Wetland	Feet
Setback from the West Lot Line	75 Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	480 Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	Feet	Setback to Well	Feet
Setback to Drain Field	Feet		
Setback to Privy (Portable, Composting)	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

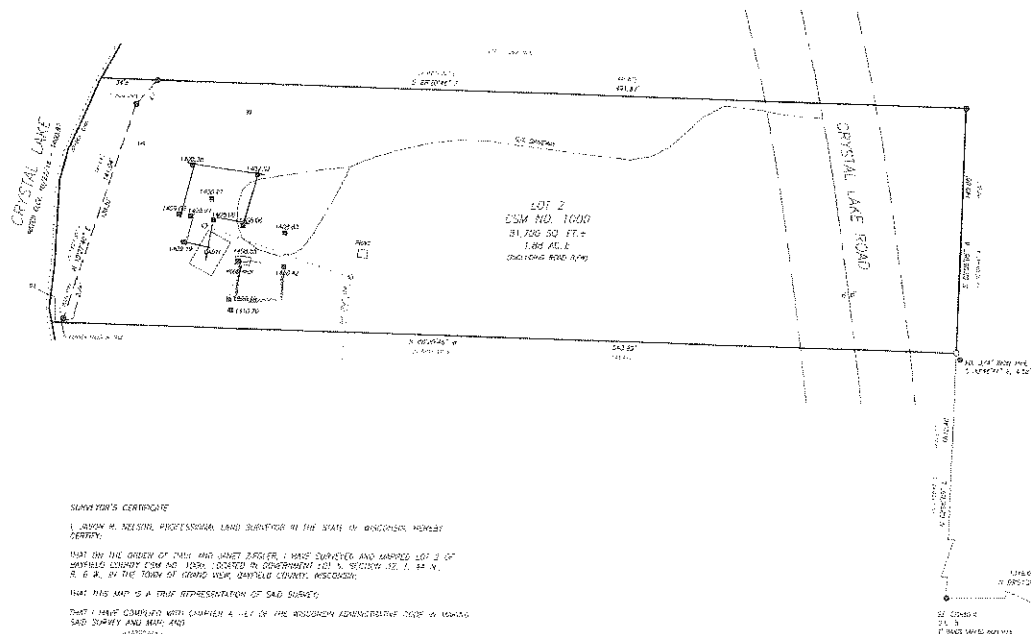
NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwellings: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

<b>Issuance Information (County Use Only)</b>		Sanitary Number: 16-1615	# of bedrooms:	Sanitary Date: 12-5-16		
Permit Denied (Date):		Reason for Denial:				
Permit #: 16-0447	Permit Date: 12-7-16					
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record)	<input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lot(s))	<input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No				
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		Case #:		
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Was Parcel Legally Created		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> No
Was Proposed Building Site Delineated		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> No
Inspection Record:						
Date of Inspection: 11-18-16	Inspected by: JWC	Zoning District (P)				
Condition(s): Town, Committee or Board Conditions Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No – (If No they need to be attached.)		Lakes Classification ( )				
		Date of Re-Inspection:				
Signature of Inspector: J. Hawley		Date of Approval: 12-5-16				
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>		

LOT 2 OF BAYFIELD COUNTY CSM NO. 1000, LOCATED IN  
GOVERNMENT LOT 5, SECTION 32, T. 44 N., R. 6 W., IN  
THE TOWN OF GRAND VIEW, BAYFIELD COUNTY, WISCONSIN

[illegible]

SLAVEY VON'S CERTIFICATE

1. JAMES H. BEESON, PROFESSOR OF LAW, UNIVERSITY OF THE STATE OF OREGON, PORTLAND, OREGON.

that in the order of 7441 and Janet Ziegler, have surveyed and mapped lot 2 of  
 1/4 section 12 and 13, located in township 121 N., section 12, T. 44 N.,  
 R. 6 E., in the town of Grand View, Grand County, Wisconsin.

THAT THIS MAP IS A TRUE REPRESENTATION OF SAID SUBJECT

That I have complied with CAMPAIGN 4 - 111 OF THE HOUSEHOLD ADMINISTRATION CODE OF CONDUCT  
Said Survey and Map; and

1941 SOURCE: [REDACTED] AND ARE CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.



LINE DATA		
LINE	BEARING	DISTANCE
1	N 41°54'07" E	12.45'



Figure 1 is a line graph titled "CHANGE IN THE NUMBER OF INDIVIDUALS IN THE POPULATION OF THE COMMON CARP (*Cyprinus carpio*)". The x-axis is labeled "TIME (YEARS)" and ranges from -40 to 0. The y-axis is labeled "NUMBER OF INDIVIDUALS" and ranges from 0 to 100. The graph shows a sharp increase in the population starting around year -20, reaching a peak of approximately 100 individuals around year -10, and then declining sharply towards year 0.

CLIENT: PAUL & JANET ZIEGLER

HEART OF THE NORTH  
SURVEYING OF HAYWARD INC

1/2/2016	1/2/2016	1/2/2016
1/2/2016	1/2/2016	1/2/2016

2010-03-14 14:00  
2010-03-14 14:00

## REFERENCES

10

10

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SUBMIT COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:  
Bayfield County  
Planning and Zoning Depart.  
PO Box 58  
Washburn, WI 54891  
(715) 373-6138

INSTRUCTIONS: No permits will be issued until all fees are paid.  
Checks are made payable to: Bayfield County Zoning Department.  
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

APPLICATION FOR PERMIT  
BAYFIELD COUNTY, WISCONSIN  
Date Stamp (Received)  
OCT 31 2016  
Bayfield Co. Zoning Dept.

Permit #: 16-0448  
Date: 10-7-16  
Amount Paid: \$7511-116  
Refund:

TYPE OF PERMIT REQUESTED: ☒ LAND USE ☐ SANITARY ☐ PRIVY ☐ CONDITIONAL USE ☐ SPECIAL USE ☐ B.O.A. ☐ OTHER

Owner's Name: PAUL ZIEBLER Mailing Address: 5310 LOGAN AVE S CITY/STATE/ZIP: MINNEAPOLIS, MN 55419 Telephone: Cell Phone: 612.750.7607

Address of Property: 46369 CRYSTAL LK RD CITY/STATE/ZIP: CAHLE, WI 54521

Contractor: PAUL ZIEBLER BUILDER Contractor Phone: 507-273-6121 Plumber: B. MANNING Plumber Phone: 715-682-6052

Authorized Agent: (Person Signing Application on behalf of Owner(s)) Agent Phone: 507-273-8127 Agent Mailing Address (include City/State/Zip): 2053 STRAUBERS DR SW ROCHESTER, MN 55902 Written Authorization Attached: Yes ☐ No ☒

PROJECT LOCATION: Legal Description: (Use Tax Statement) Tax ID# (4-5 digits): 16912 Recorded Deed File # assigned by Register of Deeds: Document #: R- Subdivision: Lot Size: 150 X 500 Acreage: 1.7

Section 32, Township 44 N, Range 06 W Town of: MINNEAPOLIS

☒ Shoreland ☐ Non-Shoreland

☐ Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? If Yes---continue --> Distance Structure is from Shoreline: feet Is Property in Floodplain Zone? Yes ☐ No ☒ Distance Structure is from Shoreline: feet Yes ☐ No ☒ Are Wetlands Present? Yes ☐ No ☒

☒ Is Property/Land within 1000 feet of Lake, Pond or Flowage If Yes---continue --> Distance Structure is from Shoreline: feet

Value at Time of Completion \* include donated time & material \$ 15000

Project	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System is on the property?	Water
<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> (New) Sanitary	<input checked="" type="checkbox"/> Well
<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/>	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: <u>Levy</u>	<input type="checkbox"/>
<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Privy (Pri) or <input type="checkbox"/> Vaulted (min 200 gallon)	<input type="checkbox"/>
<input type="checkbox"/> Run a Business on Property	<input checked="" type="checkbox"/> No Basement	<input type="checkbox"/>	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/> Foundation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/>

Existing Structure: (If permit being applied for is relevant to it) Length: 26 Width: 26 Height: 14

Proposed Construction: Length: 26 Width: 26 Height: 14

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/> Principal Structure (first structure on property)	( X )	
	<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	( X )	
	with Loft	( X )	
	with a Porch	( X )	
	with (2 <sup>nd</sup> ) Porch	( X )	
	with a Deck	( X )	
	with (2 <sup>nd</sup> ) Deck	( X )	
<input type="checkbox"/> Commercial Use	with Attached Garage	( X )	
	Bunkhouse w/ ( <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	( X )	
	Mobile Home (manufactured date)	( X )	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/> Addition/Alteration (specify)	( X )	
	Accessory Building (specify) <u>24 X 26 GARAGE</u>	( 20 X 26 )	676
	Accessory Building Addition/Alteration (specify)	( X )	
	Special Use: (explain)	( X )	
	Conditional Use: (explain)	( X )	
	Other: (explain)	( X )	

Rec'd for Issuance DEC 07 2016

Secretarial Staff

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information. I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): PAUL ZIEBLER Date: 10/31/14

(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: [Signature] Date: 10/31/14

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit 2053 STRAUBERS DR SW ROCHESTER, MN 55902

Draw or Sketch your Property (regardless of what you are applying for)

- (1) Show Location of: Proposed Construction
- (2) Show / Indicate: North (N) on Plot Plan
- (3) Show Location of (\*): (\*) Driveway and (\*) Frontage Road (Name Frontage Road)
- (4) Show: All Existing Structures on your Property
- (5) Show: (\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)
- (6) Show any (\*): (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond
- (7) Show any (\*): (\*) Wetlands; or (\*) Slopes over 20%

See map

Please complete (1) – (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	340 Feet	Setback from the Lake (ordinary high-water mark)	120 Feet
Setback from the Established Right-of-Way	Feet	Setback from the River, Stream, Creek	Feet
Setback from the North Lot Line	110 Feet	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	112 Feet	Setback from Wetland	Feet
Setback from the West Lot Line	130 Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	431 Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	Feet	Setback to Well	Feet
Setback to Drain Field	Feet		
Setback to Privy (Portable, Composting)	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwellings: All Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

<b>Issuance Information (County Use Only)</b>		Sanitary Number:	# of bedrooms:	Sanitary Date:
Permit Denied (Date):		Reason for Denial:		
Permit #: 16-0448		Permit Date: 12-7-16		
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming		<input type="checkbox"/> Yes (Deed of Record) <input type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No <input type="checkbox"/> No <input checked="" type="checkbox"/> No	Mitigation Required Mitigation Attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Case #:	Previously Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Was Parcel Legally Created Was Proposed Building Site Delineated		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner Was Property Surveyed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	
Inspection Record: OK		Zoning District (el) Lakes Classification ( / )		
Date of Inspection: 11-18-16		Inspected by: J. Kelly		Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No - (if No they need to be attached.) OK - Not for home habitation NO extra under process				
Signature of Inspector: J. Kelly		Date of Approval: 12-5-16		
Hold For Sanitary: <input type="checkbox"/>		Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>

X: 152757.32, Y: 283731.30

**Current Action: Move Mark**

## Parcel Search

## Table of Contents

CRYSTAL LAKE 0

50 m

200 ft

10909

Current theme  
Zoning